

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE: MISSISSIPPI

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES
OF CARE

Outpatient Hospital Services

Outpatient hospital services shall be reimbursed at a percentage of billed charges unless specified differently elsewhere in this Plan. The percentage paid is the lower of 75% of charges or the cost to charge ratio, as computed by Medicaid using the hospital's cost report. The cost to charge ratio shall be computed each year for use in the following rate year's payments. Adjustments to outpatient services claims may be made if the cost to charge ratio is adjusted as a result of an amended cost report, audit, or Medicare settlement. The cost to charge ratio for outpatient services will be computed under Title XVIII (Medicare) methodology, excluding bad debts and other services paid by Medicaid under a different rate methodology (i.e. Rural Health Clinic services and Federally Qualified Health Center services). Out-of-state hospitals shall be reimbursed at the lower of 75% of charges or the average of cost to charge ratio of hospitals located in Mississippi for their classification, as computed by Medicaid.

All outpatient laboratory services shall be reimbursed on a fee-for-service basis.

All outpatient radiology services shall be reimbursed on a fee-for-service basis.

Hospital-based clinics may not bill facility fees on the UB-92 unless they are a teaching hospital with a resident to bed ratio of .25 or greater.

TN # 98-04
Superseded TN # 92-11

Date Received 4/6/98
Date Approved 5/1/98
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Mississippi

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE

Clinic Services:

Rural Health Clinic Services - - Effective July 1, 1978, the Mississippi Medicaid Commission expanded the availability of medical services in rural areas by payment of part or all of rural health clinic services including diagnostic, preventative, therapeutic, rehabilitative or palliative services furnished to an outpatient by a physician or a nurse practitioner under the supervision of a physician. Such supervision may be indirect rather than "over-the-shoulder". Rural Health Clinics may be either "provider" clinics or "independent clinics". Provider clinics will be paid in accordance with the reimbursement methods and principles used to pay for services in a hospital. Independent clinics will be paid an all-inclusive rate method of payment designed to pay for actual reasonable costs as established by Blue Cross-Blue Shield of Tennessee, which serves as the fiscal intermediary for Medicare. Reimbursement will be an all-inclusive rate being used by Medicare to reimburse a clinic for all Medicare covered services. Dental services, transportation, eyeglasses, hearing aids, prescribed drugs, prosthetic devices, and durable medical equipment will be paid as currently provided for under the Medicaid Program.

Rural health clinic services for EPSDT recipients, if medically necessary, which exceed the limitations and scope for Medicaid recipients, as covered in this Plan, are reimbursed according to the methodology in the above paragraph.

Transmittal # 90-14
Supersedes TN 90-09

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Mississippi

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES
OF CARE

Independent Laboratory and X-Ray Services - Payment is made from a statewide uniform fee schedule based on 70 percent of the Medicare fee schedule with adjustments as authorized by the state Legislature.

Independent laboratory and x-ray services for EPSDT recipients, if medically necessary, which exceed the limitations and scope for Medicaid recipients, as covered in this Plan, are reimbursed according to the methodology in the above paragraph.

TN# 94-03
Supersedes TN# 92-11

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State Mississippi

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER
TYPES OF CARE**

Early and Periodic Screening, Diagnosis and Treatment and Extended EPSDT Services.

(a) Screening - (1) The screening fee for a physical assessment in accordance with the EPSDT periodicity schedule is \$37.63. The screening fee for an EPSDT vision screen is \$8.82 and the screening fee for an EPSDT hearing screen is \$8.82 and are done in conjunction with the physical assessment. (2) Interperiodic screens: An interperiodic medical screen is \$10.07 and is paid to any Medicaid provider. An interperiodic vision screen is \$8.82. An interperiodic hearing screen is \$8.82. (3) Partial screens: The reimbursement fee for a dental screen is \$16.94 and is paid to any Medicaid dental provider.

(b) EPSDT case management - The fee for case management services is \$22.67 per child.

(c) High-Risk assessment - Reimbursement is based on 75% of the current Medicaid allowable for an antepartum visit.

(d) Other services not addressed elsewhere in the State Plan - Coverage is provided for other medically necessary health care, diagnostic, treatment and / or other measures to correct or ameliorate defects, physical and mental illnesses and conditions identified during or as a result of an EPSDT screen. Such services are covered whether or not they are included elsewhere in the State Plan provided they are described in Section 1905(a) of the Social Security Act.

TN No. 99-08
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Mississippi

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE

Family Planning Services and Supplies - Payment is made from a Statewide uniform fee schedule based on 70 percent of the Medicare fee schedule with adjustments as authorized by the state Legislature. Payment to public providers is not to exceed cost as determined annually.

Family planning services for EPSDT recipients, if medically necessary, which exceed the limitations and scope for Medicaid recipients, as covered in this Plan, are reimbursed according to the methodology in the above paragraph.

TN# 94-03
Supersedes TN# 92-11

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METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE

~~**Physicians' Services**~~ - All fees for physicians' services that are covered only by Medicaid shall be reimbursed at ninety percent (90%) of the rate established on January 1, 1999, and as adjusted each January thereafter, under Medicare (Title XVIII of the Social Security Act), as amended, and which shall in no event be less than seventy percent (70%) of the rate established on January 1, 1994. All fees for physicians' services that are covered by both Medicare and Medicaid shall be reimbursed at ten percent (10%) of the adjusted Medicare payment established on January 1, 1999, and as adjusted each January thereafter, under Medicare (Title XVIII of the Social Security Act), as amended, and which shall in no event be less than seventy percent (70%) of the adjusted Medicare payment established on January 1, 1994.

T¹ No. 99-10

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T¹ No. 99-06Date Received Aug 1999Date Approved Oct 1999Date Effective Jul 2000

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Attachment 4.19-B

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State Mississippi

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE

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Supersedes TN 96-06
TN 97-01

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State Mississippi

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**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -
OTHER TYPES OF CARE**

Physician services for EPSDT recipients, if medically necessary, which exceed the limitations and scope for Medicaid recipients, as covered in the Plan are reimbursed according to the methodology, beginning on Page 5 of Attachment 4.19-B.

Supersedes TN 92-06
TN 90-14

Date Received 3-31-93
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Mississippi

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -
OTHER TYPES OF CARE

Podiatry services are reimbursed from the same fee schedule as physicians' services.

Podiatrists' services for EPSDT recipients, if medically necessary, include those services that would be covered as physicians' services when performed by a doctor of medicine for osteopathy and are reimbursed as physicians' services, Attachment 4.19-B, Page 5.

TN No. 94-12
Supersedes Approval Date 8-15-94 Effective Date 7-1-94
TN No. 92-11 Date Received 7-11-94

STATE: Mississippi

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METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-
OTHER TYPES OF CARE

Optometrists' Services for EPSDT recipients, if medically necessary, include all physician services that an optometrist is legally authorized to provide and are reimbursed as physicians' services, Attachment 4.19-B, Page 5.

TN#92-11
Supersedes TN#91-22

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